ORS Revised 8-20-15

CLASS E AMENDMENT FORM CLASS E AMENDMENT FORM Need Assistance with completing the Form?	
Mail or Fax a copy of this form to:	Need Assistance with completing the
Public Service Commission of South Carolina Clerk's Office 101 Executive Center Dr., Ste 100 Columbia, S.C. 29210	SC Office of Regulatory Staff Transportation Department
PHONE (803) 896-5100 FAX (803) 896-5199	PHONE: (803) 737-0800
ATE: JANUARY 28, 2021	
have the following Certificate of Public Convenie	ence and Necessity:
Class E Household Goods #9798A	Class E Hazardous Waste #
Please consider this as my request for the followi	ng amendment(s) to my Certificate:
Name Change	
rom:(Current Name)	(Current DBA, if Applicable)
To:(New Name)	(New DBA, if Applicable)
Scope of Authority	
(Current Scope)	(New Scope)
requires additional justification and will require the pr	for household goods movers require the filing of a full applicants in the filing of a full applicants for household goods movers require the filing of a full application. Any request to expand beyond three contiguous cour resentation of a shipper witness(s) at the hearing before the P etc. Attach any appropriate documentation)
READY SET MOVERS, LLC	READY SET MOVERS
(Name)	(DBA if applicable)
1000 JOHNNIE DODDS BLVD, UNIT: 103-326	MOUNT PLEASANT
(Street and/or Mailing Address)	(City, State, Zip Code)
aler /	(Title) Owner, President, etc.
(Signature)	(Title) Owner, Fresherity 312.
843-882-7561	_
(Telephone Number)	